Long-Term Care Best Practice Spotlight Organization® Designates

The Best Practice Spotlight Organization (BPSO)® designation, established in 2003, gives organizations the opportunity to formally implement best practice guidelines (BPG) in partnership with the Registered Nurses’ Association of Ontario (RNAO). With the 2014 launch of the long-term care (LTC) BPSO designation, the program achieved full participation of health-care organizations by addressing the unique needs of Ontario LTC homes. Through a formal partnership with RNAO, two organizations – Pioneer Ridge Long-Term Care & Seniors Services and Résidence Saint-Louis Residence – created evidence-based cultures in their organizations through the systematic implementation and evaluation of multiple RNAO BPGs over a three-year pre-designation period. In April 2018, these organizations successfully achieved BPSO designation.

Pioneer Ridge Long-Term Care & Seniors Services
Liane Heebner, Clinical Nurse Manager, BPSO Liaison

Pioneer Ridge is a municipal LTC home located in Thunder Bay, Ontario. It has 150 resident care beds, divided into four care areas. Its 240 employees include 150 full and part-time staff in the nursing department, consisting of RNs, RPNs and personal support workers.

BPGs implemented:

- Preventing and Addressing Abuse and Neglect of Older Adults
- Oral Health: Nursing Assessment and Interventions
- Supporting and Strengthening Families through Expected and Unexpected Life Events

Impact:
In the pre-designation period, this home experienced major changes after merging three LTC homes into one due to the closure of its sister homes. The impact was felt by all. The BPSO work helped staff keep evidence-based practice at the forefront, resulting in optimal resident outcomes during times of change. The guidelines selected were ideal in the circumstances, as they gave staff insight into the need for further supports for the residents and their families. The home has adopted a mission that fosters a relationship-centred approach to care. It has increased awareness related to abuse and neglect, and reduced resident-to-resident aggression. Staff/management has created resources to support families during the transition of their loved ones into LTC, and provided staff with the knowledge needed to support families. Knowledge and communication related to oral care needs of residents have also improved.

Sustainability and spread:
Embedding as many of the improvements into processes, policies and procedures was key for this LTC-BPSO. Activity updates as they relate to BPGs are a standing agenda item in management and best practice meetings. Staff discuss oral care concerns at weekly rocket rounds throughout the home. They also maintain a quarterly newsletter to communicate updates, information and outcomes in relation to best practice initiatives in the home.

Résidence Saint-Louis Residence
Susan Wendt, Director of Care, BPSO Liaison

Résidence Saint-Louis Residence is a 198-bed LTC home located in an enchanting setting on the banks of the Ottawa River in Orléans. Its interdisciplinary staff of 300 offers personal and nursing care, supportive services, a 22-bed convalescent care program, and specialized services for residents with dementia. Résidence Saint-Louis Residence allows people experiencing a loss of autonomy to evolve in a cozy, friendly, caring and safe environment.

BPGs implemented:

- Prevention of Falls and Fall Injuries in the Older Adult
- Oral Health: Nursing Assessment and Interventions
- Promoting Continence Using Prompted Voiding
- Risk Assessment and Prevention of Pressure Ulcers

Pioneer Ridge’s BPSO team: Liane Heebner, clinical nurse manager and BPSO liaison; Elena Gvora, clinical nurse manager; and Heather Woodbeck, RNAO BPSO coach.
Editor’s note: Training, coaching and beyond: Building capacity in Ontario long-term care homes
Suman Iqbal, RN, MSN/MHA, Senior Manager, Long-Term Care Best Practices Program

The Long-Term Care Best Practices Program supports LTC homes in implementing evidence-based practices to promote system-level change, with positive resident and provider outcomes. Organizational-level, systematic implementation of BPGs is done through the LTC-BPSO designation program. This newsletter focuses on the two LTC homes that successfully achieved their BPSO designation in April 2018. The program also welcomed seven LTC organizations representing nine LTC homes as the latest cohort of LTC-BPSOs.

At the launch event on April 10, 2018, representatives from the incoming organizations shared an overview of their respective LTC home and their goals for the BPSO pre-designation. They also had the opportunity to meet their respective BPSO coach. Together, they set out the expectations of this program, identified key milestones, and prepared for guideline implementation and evaluation. Leaders from previous cohorts were also on hand to share successful BPG implementation strategies, highlights and achievements.

LTC-BPSO® Designates

Résidence Saint-Louis Residence

Impact:
On May 15, 2015, Résidence Saint-Louis Residence started its journey to become a LTC-BPSO of the RNAO. It was the first LTC home in the Champlain region and the first francophone LTC home in the province to successfully achieve this recognition.

Over the last three years, its champions, in partnership with RNAO, families and residents, have implemented four BPGs, becoming leaders in the provision of quality care at Résidence Saint-Louis Residence. Thanks to the different initiatives related to these guidelines, champions have reduced the number of falls and prevented serious injuries, helped residents achieve better oral health, accompanied residents to remain – or even become – continent, and seen fewer pressure injuries.

Sustainability and spread:
The goal in the BPSO process is to sustain these endeavours and have the home recognized as an excellent place for residents to live and receive care, as well as an optimal place to work.

Résidence Saint-Louis Residence’s BPSO team (L to R): Stephanie Kim, RNAO BPSO coach; Maggy Célestin, RN; and Teresa Lee, advanced practice nurse.
Welcome to the newest LTC-BPSOs for 2018-2021

In April of this year, RNAO launched Cohort E of the LTC-BPSO program for the 2018-2021 pre-designation period. Seven new organizations (representing nine LTC homes) joined previous LTC-BPSO cohorts, bringing the total number of Ontario LTC homes that take part in the program to 38.

Leaders from Cohort E joined RNAO staff at a launch event on April 10, and discussed how they will partner with RNAO to build evidence-based cultures in their organizations by implementing multiple RNAO BPGs. They were formally welcomed into the program by Michelle Acorn, Ontario’s chief nursing officer. Other leaders shared their vision for the LTC-BPSO designation, and discussed the impact evidence-based practices are having on resident outcomes.

F. J. Davey Home

The F. J. Davey Home is a LTC organization located in beautiful Sault Ste Marie, Ontario. The home is designed to care for residents in a homelike environment.

Number of residents: 374, Number of staff: 480

Special features: The F. J. Davey Home is the first pre-designate LTC-BPSO in the North East. The F. J. Davey Home is a non-profit organization and the largest home in Sault Ste Marie. The multidisciplinary team is fully committed to excellence and ongoing improvement in the service and care they provide to residents. The home has a committed, dynamic team that works closely together to create an evidence-based practice culture with the support of RNAO.

The F. J. Davey Home prides itself on community involvement, has a direct relationship with the nursing health sciences department at Sault College and hosts an average of 120 health-care students for preceptorship and clinical placements annually.

BPGs selected for implementation: Person-and Family-Centred Care; Preventing and Addressing Abuse and Neglect of Older Adults; and Assessment and Management of Pain, third edition.

LTC-BPSO Liaison: Kerry Gartshore, ICP, Infection Control Coordinator/Staff Educator

LTC-BPSO Coach: Freda Poirier, LTC-BPC, North East

Overall Goal for LTC-BPSO: The F. J. Davey Home’s goal is to be at the forefront of promoting evidence-based nursing in LTC in north eastern Ontario. Staff is committed to improving the consistency and quality of nursing care and in facilitating an evidence-based practice culture through the implementation of BPGs. The F. J. Davey Home believes the implementation, evaluation and sustainability of RNAO BPGs will help it move forward offering excellence in service and quality resident outcomes.
The Geraldton District Hospital (GDH) is located in the northwestern Ontario community of Geraldton; within the Municipality of Greenstone. It is an accredited, progressive health-care organization committed to providing high quality health services to the residents of Greenstone, encompassing seven rural communities and four First Nations Reserves. The GDH’s mission is to provide quality patient and family centred care where the residents and patients are at the centre of the organization’s decisions and care planning.

**Number of Residents:** 26, **Number of Staff:** 33

**Special Features:** The Elderly Capital Assistance Program (ELDCAP) LTC unit resides within the acute care hospital. Its goal to achieve LTC-BPSO designation is consistent with its corporate vision to achieve excellence in rural health care and wellness promotion.

**BPGs selected for implementation:** Assessment and Management of Pain, third edition; Delirium, Dementia, and Depression in Older Adults: Assessment and Care, second edition; and End-of-Life Care During the Last Days and Hours.

**LTC-BPSO Liaison:** Celine DuVall, LTC-BPSO liaison

**LTC-BPSO Coach:** Heather Woodbeck, RNAO BPSO coach; Celine DuVall, LTC-BPSO liaison; Lucy Bonanno, CEO; and Susan Powell, NP.

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**John Noble Home**

The John Noble Home is a 156 bed LTC municipal home owned and operated by the City of Brantford and the County of Brant. Its dedicated team of 275 staff members have a proud tradition dating back 130 years of caring for the most vulnerable people in the community. Its campus of care includes an innovative Day and Stay Adult Program, Seniors Housing and a partnership with the Alzheimer’s Society.

**Number of residents:** 156, **Number of staff:** 275

**Special features:** The John Noble Home originally opened as a House of Refuge in 1888 where care and housing was provided to the poor, homeless and mentally ill. Over the years many construction projects have occurred and on November 5, 1990, the John Noble Home officially opened 156 beds following a four-year renovation project. The home consists of six resident home areas all named after local dignitaries and/or regional geographic landmarks. It has a long standing and proud history in the community.

**BPGs selected for implementation:** Preventing Falls and Reducing Injury from Falls, fourth edition; Assessment and Management of Pain, third edition; and Person-and-Family-Centred Care.

**LTC-BPSO Liaison:** Danielle Kennedy, Resident Care Co-ordinator

**LTC-BPSO Coach:** Deidre Boyle, LTC-BPC, HNHB

**Overall Goal for LTC-BPSO:** Their goal is to create and support a culture of evidence-based practice and quality improvement with a focus on improving the outcomes and experiences for residents. In addition, John Noble wants to create a working environment that empowers all staff to embark on a fulfilling career with a lifetime of learning opportunities and growth. All of this takes place in an environment that respects and honours the autonomy and right of choice for each resident and celebrates their individual uniqueness and contribution to its community.
Meadow Park Nursing Home (Chatham)

Meadow Park has been proudly serving the community of Chatham-Kent since 1979, with some staff present from the beginning. Meadow Park is one of 14 LTC homes in Ontario owned and operated by Jarlette Health Services.

Number of residents: 99, Number of staff: 125

Special features: Meadow Park provides a family-like atmosphere along with a great sense of community spirit. Meadow Park has a supportive multidisciplinary team, including a physician, nurses specializing in wound care, pain and behaviour management as well as other disciplines, who all work closely to provide the best care possible. Meadow Park says its commitment to achieve BPSO designation matches its slogan “Making an outstanding difference in the lives of others”.

BPGs selected for implementation: Assessment and Management of Pain, third edition; Assessment and Management of Pressure Injuries for the Interprofessional Team, third edition; and Preventing Falls and Reducing Injury from Falls, fourth edition.

LTC-BPSO Liaison: Jessica Francis, Co-DOC
LTC-BPSO Coach: Bev Faubert, LTC-BPC, Erie St. Clair

Overall goal for LTC-BPSO: Meadow Park’s goal is to enhance the quality of care residents receive through the use of evidence-based practices. Conducting gap analyses to evaluate current practices and implementing BPGs will support Meadow Park’s desire to promote excellence.

Primacare Living Solutions Inc.

Primacare Living Solutions is a private, Canadian, family-owned and operated LTC provider whose mission, vision and values reflect its commitment to excellence in resident care. It manages its homes as an extension of its family, focusing on the dignity, independence and respect for residents, as well as providing a safe, supportive and opportunity-rich environment for its staff. Primacare currently manages three LTC homes in Ontario: Burton Manor – Brampton, Henley House – St. Catharines, Henley Place – London.

Number of residents: 480
Number of staff: 660

Special features: Burton Manor has a diverse ethno-cultural resident (128) and staff (215) population that reflects the Brampton community. The home is strengthened through diversity and celebrates this through education, programming and special events. Henley House’s 160 residents live in six unique “neighbourhoods” named after well known parks in St. Catharines. The 215 staff is recognized for being engaged and constantly striving to find ways to participate with the residents and their families. Henley Place’s 192 residents and the 230 staff work together on outreach projects such as: meaningful menus (preparing and donating meals for the men’s mission), creating milk bag mats for Haiti and distributing back packs filled with supplies to local schools.

BPGs selected for implementation: Preventing Falls and Reducing Injury from Falls, fourth edition; Promoting Safety: Alternative Approaches to the Use of Restraints; and Assessment and Management of Pain, third edition.

LTC-BPSO Liaison: Sarah Hind, Director of Clinical Services, Primacare Living Solutions
LTC-BPSO Coach: Sue Sweeney, LTC-BPC, South West (Henley Place). LTC-BPC supports from Deirdre Boyle, HNHB (Henley House) and Rebecca de Witte, Central West (Burton Manor)

Overall Goal for LTC-BPSO: Primacare’s goal is to further support and expand the work in which it is currently engaged throughout the organization. This will be achieved by:
- Implementing the necessary structure and organization
- Planning, implementing and evaluating
- Use of tools to ensure accurate data collect and analysis
- Team engagement and communication across all levels of the organization
- Encouraging everyone to “walk the walk and talk the talk” when it comes to evidence-based care.
The Wexford Residence Inc.

The Wexford Residence is a single-site LTC organization located in Scarborough, Ontario. Founded in 1978, Wexford has been an innovative community partner with a strong presence for providing high quality care to seniors. In 2017, the home underwent accreditation and received Exemplary Standing from Accreditation Canada.

**Number of residents:** 166, **Number of staff:** 225

**Special features:** The Wexford is a non-profit organization that is governed by a voluntary board of directors. The LTC organization is adjoined to a 90-bed independent seniors living facility. The home has a very supportive Senior Leadership and Administration, which consists of a chief executive officer, two physicians, a director of care, nurse managers, nurse practitioner, co-ordinator of behavioural support, co-ordinator of staff development, physiotherapist, registered dietitian, skin/wound co-ordinator and nursing rehabilitation co-ordinator. It believes the structure of its clinical programs, along with an interdisciplinary approach is essential for successful resident care.

**BPGs selected for implementation:** Preparing Falls and Reducing Injury from Falls, fourth edition; Oral Health: Nursing Assessment and Intervention; and Person-and Family-Centred Care.

**LTC-BPSO Liaison:** Julia Beckford, Co-ordinator of Staff Development/Continuous Quality Improvement

**LTC-BPSO Coach:** Susan McRae, LTC-BPC, Toronto Central and South Scarborough Homes

**Overall Goal for LTC-BPSO:** The overall goal is to progressively implement evidence-based practices into the home while keeping staff, residents and their families engaged. It strives to achieve the Health Quality Ontario (HQO) benchmark targets through continuous quality improvement.

Villa Colombo Homes for the Aged Inc.

Villa Colombo’s doors were originally opened in 1976. It was the first Italian ethno-specific home in Toronto. Villa Colombo is an entire campus with assisted living, adult day program, a transitions program, and an Alzheimer’s day program. It also prepares Meals on Wheels for the community.

**Number of residents:** 391, **Number of staff:** 550

**Special features:** Faith, a key component to the Italian heritage is experienced in the Chapel beside the Piazza. Mass is provided twice a day, six days a week, and is broadcast on the internal television channel. These services support management of responsive behaviours by involving residents in a program they can easily participate in despite cognitive decline. In addition, there is a Snoezelen room to manage and prevent escalation of responsive behaviours with a garden theme of a water fountain and for those residents not able to come to the room, mobile carts are also available.

**BPGs selected for implementation:** Assessment and Management of Pain, third edition; End-of-Life Care During the Last Days and Hours; Preventing and Addressing Abuse and Neglect of Older Adults; and Promoting Safety: Alternative Approaches to the Use of Restraints.

**LTC-BPSO Liaison:** Nikki Mann, Director, Resident Services

**LTC-BPSO Coach:** Sue Bailey, LTC-BPC, Central and North Scarborough Homes

**Overall Goal for LTC-BPSO:** Bringing evidence-based practices to the forefront to improve care delivery at the bedside. Develop and sustain an exceptional and robust program of quality services and achieve a higher level of practices while integrating these practices into daily routines and tasks.
Coaching to transform through the LTC-BPSO pre-designation: Summary of self-reflections

The implementation work of LTC-BPSOs focuses on the work of LTC staff, with a lens on solutions that are long-term, consultative and collaborative. BPG implementation exceeds legislative requirements in LTC, and as such, strengthens the work of staff to improve quality of care and outcomes for residents. It also impacts positively on staff and organizational outcomes. Here’s how the LTC-BPCs serving as LTC-BPSO coaches support the LTC homes.

Sue Bailey, coach for Markhaven Home for Seniors and Villa Colombo Homes for the Aged

In April 2017, I became a LTC-BPSO coach for Markhaven Home for Seniors in Markham, Ontario. That’s when our wonderful relationship of inter-professional collaboration began. The home’s meeting room was often brimming with leaders, including RNs, RPNs, PSWs, and activation and other stakeholders. We reviewed opportunities to engage staff in champion workshops, knowledge exchange meetings, progress reporting sessions, and NQuIRE data submission dates. Together we completed a gap analysis for each of Markhaven’s chosen BPGs for implementation. Teams actively involved themselves in implementing recommendations chosen as priorities to achieve their BPSO goals.

The coach experience has allowed me to live aspects of transformational leadership practices found in RNAO’s Developing and Sustaining Nursing Leadership BPG. I’ve been able to build relationships and trust, foster an empowering work environment, and support knowledge development, integration, changes and complexities of the system. When Markhaven hosted its champion Open House, I beamed with pride as I watched how the various team members were able to express their acquired knowledge and accomplishments to numerous other LTC homes in attendance.

This coaching experience has provided a positive foundation for working with other LTC-BPSO pre-designates, including Toronto’s Villa Colombo, now in its first year.

Deirdre Boyle, coach for St. Peter’s Residence at Chedoke, The Regional Municipality of Niagara (Deer Park Villa, Douglas H. R apeje Lodge and Woodlands of Sunset), John Noble Home, and Primacare Living Solutions Inc. (Henley House)

Being a LTC-BPSO coach involves supporting teams at various homes to recognize strengths and celebrate accomplishments, as well as determine areas for improvement. Using the knowledge-to-action framework, I coach six LTC-BPSO homes to continue to implement evidence-based best practices to care for residents.

As a coach, my responsibility is to provide each home with the resources and support they need to be successful not only in achieving and maintaining BPSO designation, but also improving resident outcomes. D. Boyle

I have learned that each organization has its own unique culture. What works in one home may not work in another, necessitating flexibility and creativity on my part. I need a large and varied collection of resources to share.

The Regional Municipality of Niagara has eight LTC homes. During the first two years of its BPSO work, the team successfully implemented five BPGs in three LTC-BPSO homes. Recently, I worked with its BPSO champions to disseminate the BPGs to the remaining five homes in the region.

The tremendous work at LTC-BPSO designate St. Peter’s Residence at Chedoke also continues, with a vision to sustain the designation. As well, we recently celebrated the launch of LTC-BPSO pre-designates Henley House, Primacare Living Solutions Inc., and John Noble Home. At each home, the multidisciplinary staff was engaged, enthusiastic, and proud to be caring for residents using best practices.

There is much to be celebrated about LTC, thanks to the many dedicated and caring staff who embrace BPGs to provide the best possible quality of life for residents.

Rebecca de Witte, coach for Region of Peel (Malton Village, Peel Manor, Tall Pines and Vera M. Davis), Holland Christian Homes (Faith and Grace Manor), and Primacare Living Solutions Inc. (Burton Manor)

I joined RNAO in April 2017, immediately taking on a new LTC-BPSO, Holland Christian Homes (HCH). As you can imagine, I was a little nervous, but I grabbed the bull by the horns and reviewed the contract to better understand the home’s goals over the next three years.

Loving a challenge, the home and I as its coach took our first steps together by attending RNAO’s week-long training at the summer institute. Moment by moment, session by session, I came to the realization that by achieving each of the deliverables, HCH would transform itself into a centre of excellence. This transformation would be part of leading the way forward in the LTC sector.
As the LTC-BPSO coach for the Perley and Rideau Veterans’ Health Centre (PRVHC), I have had the privilege of being a part of the journey from pre-designation to becoming a LTC-BPSO. Quality improvement can sometimes seem like a never-ending and overwhelming task in health care.

My role as a coach is to support the organization and the BPSO liaison in meeting deliverables. I do this by facilitating resource and information sharing, and by motivating and encouraging positivity. This is my first opportunity as a coach, and the experience has allowed me to better understand how to support planning for overcoming barriers, maintaining sustainability, and evaluating change. What I have found to be imperative in PRVHC’s success during the first two years of its pre-designation is the support of its senior leadership right from the beginning. This support has allowed for the right team structures to build a strong foundation and to support the implementation and evaluation of BPGs. The BPSO team was also able to clearly articulate to stakeholders the ‘why’ for each of its practice changes in its BPSO pre-designation work. Leadership guru Simon Sinek once said: “People don’t buy what you do; they buy why you do it.”

As PRVHC embarks on its third and final year of the pre-designation period, I look forward to continuing to support its initiatives, and to help sustain guideline implementation and knowledge use.

The Region of Peel has four homes in the Central West Local Health Integration Network (LHIN). They are a designated group of municipal BPSO homes having already implemented BPGs over the last three years. My role is more of a co-ordinator model, whereby I support the homes as they continue to implement guidelines with their focus on sustaining the changes they have made.

What is really exciting about this change is that the Region of Peel is very confident in its knowledge-to-action practices. It now combines two BPGs into one gap analysis while also fulfilling one action plan at the same time. This goes to show what you can achieve with practice and experience. Looking forward to supporting the most recent addition, Burton Manor, for the next three years.

The coaching and mentoring are important skills for personal and professional success in order to successfully support any individual, team or organization. My role as coach for Tilbury Manor, Fiddick’s Nursing Home and Meadow Park Nursing Home has been one of the most memorable and rewarding times in my nursing career.

The coaching role extends beyond providing education to staff about evidence-based practices to enhance resident care. There is a close, trusting relationship that develops, which requires empathy and sensitivity to sometimes overwhelming challenges in the LTC sector. The empowerment and success of these LTC homes during the BPSO pre-designation requires a commitment to improve resident care within existing resources.

To successfully maintain a positive coach-BPSO relationship, I need to continuously review my own communication and leadership style so that I can be a role model who can be trusted, who is resourceful despite the challenges, and who will motivate and empower the LTC team by instilling a sense of hope and inspiration. The journey can feel difficult. That’s why it is so rewarding each time a milestone is achieved in the BPSO journey. The empowerment of staff and the satisfaction experienced by the residents and families during this collaborative process is a direct result of the evolution of great relationships for everyone.

Stephanie Kim, coach for The Perley and Rideau Veterans’ Health Centre

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Ibo Macdonald, coach for Résidence Saint-Louis Residence

Résidence Saint-Louis Residence was the first LTC-BPSO in the Champlain region. At the outset, BPSO liaison Teresa Lee and I discussed that this journey was going to be a partnership. My role as the coach was to support the steps of implementation and to prompt her about the deliverables. Teresa, in turn, helped me to understand the organizational culture and context, as these can be both barriers and facilitators to implementation. Initially, the process was a consultative partnership through which I supported the team
November is Fall Prevention Month
Organizations and individuals in Canada and beyond are encouraged to come together to coordinate fall prevention efforts for a larger impact. Now in its fourth year, the Fall Prevention Partners have planned the campaign by creating and updating the Toolkit to enable individuals and organizations to participate by planning activities and sharing evidence-informed information. The motto says it all “It takes a community to prevent a fall: We all have a role to play”. Learn more by checking out the toolkit and by joining the Fall Prevention Community of Practice and checking out the loop website. Stay connected! Follow us on Twitter, Facebook, and join our mailing list. Visit www.fallsloop.com.

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as it conducted a gap analysis. Together, we conducted education for staff on the foundation of BPGs and the process of implementation. Following this, we moved into a collaborative partnership with point-of-care staff. We reviewed the gap analysis, prioritized the recommendations, and came up with interventions that fit. I was invited to implementation team and steering committee meetings and was blown away by the passion and enthusiasm of each team member.

Finally, we moved to a diminished contact partnership as the team became more confident in its abilities to implement and sustain their work. They took over, and our contact slowly decreased. This was the greatest moment for me, as I knew they had developed the capacity and skills to continue to move implementation forward.

Being involved in the implementation at the LTC-BPSO level was amazing. The incredible community spirit that is generated within the LTC home is incredible. The experience was much richer than I could have ever anticipated, and I feel very privileged to have been invited into the home and allowed to participate in its journey.

Freda Poirier, coach for F. J. Davey Home
I began my work with F. J. Davey home as the LTC-BPC in 2015. From the first meeting, it was clear this home was invested in improving quality outcomes for its residents. A trusting relationship with the leadership team and staff was developed. Capacity was then gained through education on evidence-based best practices. The home has held two champions workshops and a champions’ open house in the past three years. This involvement in capacity development has provided an excellent foundation for its readiness to apply and achieve BPSO pre-designation status. My hope as the LTC-BPSO coach is to be a partner in the journey, to be witness to the home’s growth, and to grow in my own role capacity. There is so much inspiration shared when changes are made and the outcomes are seen firsthand in the improvement of resident quality care outcomes.

Amy Reid, coach for Grove Park Home for Senior Citizens
The BPSOs are showing some amazing results with quality improvements in resident care and healthy workplace environments. However, as anyone who works in LTC knows all too well, life is hectic, and change is inevitable. As an LTC coach, I took these two factors to heart when determining how best to support my LTC-BPSO home through pre-designation.

One practice that was essential to success was listening to the BPSO team’s concerns. Sometimes, all they needed was reassurance they were making progress. It was a “forest for the trees” type of scenario. Other times, they needed a sounding board for ideas or to double-check they were on the right track.

The other practice I found most helpful was to support the home in keeping track of deadlines for deliverables. Dates can sneak up on you, and before you know it, you’re right up against your last chance for the Advanced Clinical Practice Fellowship (ACPF) application, or your deadline to submit articles or prep times for webinars. Time flies, and in the blink of an eye, that final year before designation is upon you.

Professionally, I have been able to further develop my project-management skills by assisting with managing deadlines and due dates for this aspiring BPSO.
My journey as LTC-BPSO coach has expanded, allowing me to embrace each pathway to reinvigorate my passion for and commitment to best practice implementation and resident outcomes.

I work collaboratively with the LTC homes to implement best practices and organization-wide strategies towards BPSO designation. Some of the activities I have found most effective utilize the existing infrastructure to engage stakeholders at point-of-care, and identify gaps in an effort to make improvements.

Before we were coaches, we served as LTC-BPC for our homes. As coaches, we are taking this existing relationship into a deeper dive with the BPSO program. There is no recipe or formula for BPSO success, other than embracing lessons learned, adapting to context, and exercising a willingness to test out new change ideas while also sharpening our learnings both as a coach and as the BPC.

I am committed to fostering trust, relationships, effective communication channels, and flexibility with respect to the needs of the organizations I coach. The real value of this journey lies in the experiences, milestones, outcomes and feedback received. Collective learning from coaches across the province also helps to shape the BPSO program, approach, deliverables and outcomes for change in the system.

It has been rewarding to benefit from the experiences gained, stories shared, teams influenced, and most of all with each resident whose life we have touched.

Being a LTC-BPSO coach has been a very fulfilling experience both professionally and personally. I have had the honour of working with some amazing individuals in embedding evidence-based practices in their organizations. It has definitely been a great learning opportunity to work with an organization from the beginning of BPSO pre-designation to the sustainability phase in systematically implementing BPGs.

As a coach, being part of this process has enabled me to learn first-hand the daily challenges an organization experiences. It has demonstrated to me the commitment and dedication these organizations have as they strive for excellence in resident care. Many resources have been developed that are now being utilized by other organizations to assist them in implementing evidence-based practices. These include the educational videos on the prevention of abuse and neglect in LTC homes, with supporting discussion guides and a reporting algorithm for point-of-care staff. Other resources are a healthy bowel protocol and resident/staff report cards to evaluate person- and family-centred care practices.

It is a very satisfying feeling to know that residents in Ontario and the South West Local Health Integration Network (LHIN) are being influenced positively by the BPSO work. I feel very privileged to have this opportunity to be part of the BPSO designation process as a coach.

I love being a LTC-BPSO coach. In this role, I’ve built deeper relationships with managers and staff in the BPSO homes. One of the best parts is seeing staff grow and develop with the BPSO opportunities. It is great to support people as they progress from being uncertain about implementing a BPG to confidently sharing their experiences with other homes.

I’ve learned how the process of implementing one BPG can have implications for other areas of care. When Pioneer Ridge implemented the oral health BPG, the oral care committee reviewed a complaint from one resident about not getting his teeth cleaned, and in doing so, identified others areas for improvement. During the transition of three homes into one, a formal process for reviewing residents’ care plans was implemented. Since realizing this, daily reviews have been successfully implemented.

The BPSO timelines mean that I get to see the whole BPG implementation process, from assessing with a gap analysis, to developing action plans, trialing solutions, working through barriers, and evaluating along the way. During our regular coaches meetings, I’ve learned about implementing the BPSO program in large LTC homes and across multiple homes under one organization. Each setting requires an individualized approach. In the North West LHIN, we have three BPSOs that are ELDCAP homes attached to hospitals. I’ve helped the small units improve practice and spread these changes to the acute care units.

I am so grateful to be a LTC-BPSO coach.